Anti-leprosy measures in Orissa

1735. SHRI JAGADISH JANI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have taken anti-leprosy measures in Orissa during the last three years;

(b) if so, what are the anti-leprosy drive launched in Orissa so far; and

(c) the number of people in that State who have been benefited under the anti-leprosy programme during the Seventh Five Year Plan period so far?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Yes, Sir.

(b) (i) The following district have been brought under Multi-Drug therapy of NLEP:—

1. Balasore
2. Cuttack
3. Dhenkanal
4. Ganjam
5. Mayurbhanj
6. Puri
7. Sambalpur

(ii) It has also been decided to take up four more districts under MDT in Orissa i.e. Bolangir, Korraput, Phulbani and Sundargarh. The Government of Orissa have been requested to prepare these districts for MDT by creating necessary infrastructure, establishment of District Leprosy Societies etc.

(iii) Orissa has repealed the Lepers Act 1898. The Health Education activities and training facilities to staff under NLEP has been intensified.

(c) Upto the end of February 1989: 1,87,071 cases have been detected; and 1,86,416 put on treatment and 2,14,609 discharged.

Popularity of Homoeopathic Treatment

1736. SHRI JAGADISH JANI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that Homoeopathy treatment is gaining popularity in the rural areas of the country;

(b) if so, the steps taken by Government for expanding Homoeopathic medical treatment to the rural areas during the 7th Five Year Plan; and

(c) the details of the facilities extended in the rural areas in Orissa during that plan period?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): (a) Yes, Sir. Homoeopathy is already a recognised system of treatment which is finding wider acceptability in the rural areas of the country.

(b) The Central Council for Research in Homoeopathy (CCRH) has established 6 Clinical Research Units in Tribal areas during the 7th Five Year Plan in addition 16 tribal Units already established during the 6th Five Year Plan in different parts of the country where Homoeopathic treatment is also being provided to the people of the area at their door steps. The Central Research Institute (H), Kottayam and Clinical Research Unit, Puri have also been providing medical care to the rural areas in their periphery as by-way of research. In the meeting of the Central Council of Health and Family Welfare held in February 1989 it was resolved that the State Government must optimally utilise the services of practitioners of Indian System of Medicine and Homoeopathy in primary health care and family Welfare. The council in its meeting has also resolved that there should be separate directorate for homoeopathy in each State.

(c) To the extent the Central Government are concerned one Clinical Research Unit (Tribal) has been established by the CCRH at Sambalpur during the 7th Five Year Plan period. Be-